

Preliminary Recommendations by the Members of the Optometry Technical Review Committee on the Optometrists' Proposal for a Change in Scope of Practice for the September 6, 2013 Public Hearing

The members of the Optometry Technical Review Committee formulated preliminary recommendations on the current, amended version of the optometrists' proposal for a change in scope of practice during their August 9, 2013 meeting by taking action on the six statutory criteria of the Regulation of Health Professions Act under Nebraska Revised Statutes, Section 71-6221. These six criteria and the committee recommendations on each of them are described below. These actions, along with the subsequent action taken on the entire proposal, comprise the committee's preliminary recommendations on the proposal as amended.

Actions taken on the six statutory criteria:

Criterion one: The health, safety, and welfare of the public are inadequately addressed by the present scope of practice or limitations on the scope of practice.

Voting aye were Sandstrom, Wyrens, McCarty, and Dering-Anderson. Voting nay were Howorth and Peters. Ms. Parsow abstained. The proposal passed this criterion.

Comments by committee members:

- Sandstrom commented that allowing optometrists to prescribe oral anti-glaucoma drugs would improve access to care for Nebraskans.
- Wyrens expressed concern about the need to improve timely access to eye care services, especially in the rural areas of Nebraska, and that the proposal would enable optometrists to address this concern.
- Peters and Howorth indicated that the current scope of practice adequately serves the needs of Nebraskans.
- McCarty and Dering-Anderson indicated that rural Nebraska is experiencing an on-going decline in the number of available physicians and that optometrists are needed to address an increasing shortage of available practitioners to provide eye care services in these areas.

Criterion two: Enactment of the proposed change in scope of practice would benefit the health, safety, or welfare of the public.

Voting aye were Sandstrom, Wyrens, McCarty, Howorth, and Dering-Anderson. Voting nay was Peters. Ms. Parsow abstained. The proposal passed this criterion.

Comments by committee members:

- Sandstrom stated that the proposal would benefit the health, safety, and welfare of the public by allowing optometrists to prescribe anti-glaucoma drugs. There are emergencies that require speedier access to care than the current situation allows.
- Peters stated that there were some benefits, but the additional risks associated with the proposal outweigh these benefits.
- McCarty commented that access to care is a very real issue in some parts of Nebraska, and optometrists are ready to step in and address these needs.

- Howorth indicated that there are significant benefits to the proposal.
- Dering-Anderson and Wyrens indicated that there is a need for better access to eye care services in rural areas of Nebraska.

Criterion three: The proposed change in scope of practice does not create a significant new danger to the health, safety, or welfare of the public.

Voting aye were Wyrens, McCarty, Howorth, and Dering-Anderson. Voting nay were Peters and Sandstrom. Ms. Parsow abstained. The proposal passed this criterion.

Comments by committee members:

- Sandstrom commented that the proposal would create significant new dangers to public health and safety. The proposed oral medications go beyond what is needed by optometrists to deliver primary care. The proposed surgical procedures are not supported by sufficient education or training.
- Peters commented that current optometry education and training lacks anything like an internship, for example, and is not sufficient to support either the prescription of complex medications or surgical procedures.
- Howorth indicated that he could not see any significant new danger to the public from the proposal.
- McCarty stated that dangers to the public safety can come from the members of any health care profession. The opportunity to improve access to eye care services overrides the potential for new risk of harm as regards this particular proposal. The lack of evidence of harm in Oklahoma seems to negate stated concerns about the safety of the proposed scope of practice.
- Dering-Anderson commented that the optometry profession in Nebraska is underutilized. We utilize the abilities of physician assistants and nurse practitioners much better. There is a need to more fully utilize the abilities of optometrists, as well. Current optometric scope of practice already allows them to prescribe many medications, including some oral medications. No harm has resulted from this scope of practice. There is no evidence from other states that have this expanded scope of practice to indicate that any harm has resulted from that scope of practice, either.
- Wyrens commented that the amendments submitted by the applicant group have been helpful in addressing concerns raised about the proposal.

Criterion four: The current education and training for the health profession adequately prepares practitioners to perform the new skill or service.

Voting aye were Wyrens, McCarty, Howorth, and Dering-Anderson. Voting nay were Peters and Sandstrom. Ms. Parsow abstained. The proposal passed this criterion.

Comments by committee members:

- Sandstrom and Peters commented that optometrists receive too little medical education and training to support the proposed expanded scope of practice.
- McCarty stated that the proposed scope elements do not require the education and training of an ophthalmologist to be performed safely and effectively, and that optometrists are adequately trained and educated to provide the new scope elements.
- Dering-Anderson stated that information on the optometry school in Oklahoma indicates that the necessary education and training to perform all of the scope

elements is in place and prepares optometrists to perform these elements safely and effectively.

- Wyrens commented that the amendments submitted by the applicant group have been helpful in addressing concerns raised about the proposal.

Criterion five: There are appropriate post-professional programs and competence assessment measures available to assure that the practitioner is competent to perform the new skill of service in a safe manner.

Voting aye were Wyrens, McCarty, Howorth, and Dering-Anderson. Voting nay were Peters and Sandstrom. Ms. Parsow abstained. The proposal passed this criterion.

Comments by committee members:

- Sandstrom commented that there are no competency assessment measures for the surgical component of the proposal for the conditions requested on a living human eyelid.
- Peters commented that the lack of sufficient didactic course preparation and the absence of residency training are concerns with these proposed changes. Also, the fact that the proposal depends on the standards of the optometry school in Oklahoma, exclusively, means that there is nothing to which these standards can be compared to, or measured against, to assess their adequacy.
- Dering-Anderson, Wyrens, McCarty, and Howorth agreed that there are adequate post-graduate assessment mechanisms to support the proposed changes.

Criterion six: There are adequate measures to assess whether practitioners are competently performing the new skill or service and to take appropriate action if they are not performing competently.

Voting aye were Wyrens, McCarty, Howorth, and Dering-Anderson. Voting nay were Peters and Sandstrom. Ms. Parsow abstained. The proposal passed this criterion.

Comments by committee members:

- Sandstrom commented that the surgical component of the proposal is not supported by adequate assessment measures for optometry practitioners as regards this criterion.
- Dering-Anderson commented that it is the responsibility of the Department and the Board of Optometry to regulate the optometry profession, and that one must have confidence that they will protect the public.
- McCarty, Wyrens, and Howorth indicated agreement with Dering-Anderson on the issues raised by this criterion.

Action taken on the entire proposal was as follows:

This component of the preliminary recommendations process asks the committee members the following question: Is the current proposal as amended in the best interest of the public health and welfare of Nebraskans? Voting aye were Wyrens, McCarty, Howorth, and Dering-Anderson. Voting nay were Peters and Sandstrom. Ms. Parsow abstained. By this vote the committee members tentatively agreed that the current proposal as amended is in the best interest of the public health and welfare of Nebraskans.

Comments by committee members:

- Sandstrom and Peters indicated that the surgical and oral medication components are beyond the scope of primary care and beyond what optometrists are capable of providing safely and effectively.
- Mr. Peters expressed concern that the applicants seem to be attempting to redefine what constitutes surgery and systemic care to suit their own needs rather than the needs of the public.
- Parsow responded to concerns expressed about 'scope creep' by stating that this problem is 'everywhere' in health care today, and is not unique to the issues of this review.
- Dering-Anderson commented that the proposal would be good for the public because it would improve access to care in underserved areas of Nebraska.